

AMENDED IN ASSEMBLY JULY 10, 1997

AMENDED IN SENATE MAY 21, 1997

**SENATE BILL**

**No. 1299**

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**Introduced by Senator Watson**

February 28, 1997

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An act to ~~add Section 14087.301 to~~ *amend Section 14087.961* of the Welfare and Institutions Code, relating to human services.

LEGISLATIVE COUNSEL'S DIGEST

SB 1299, as amended, Watson. Medi-Cal.

Existing law provides for the Medi-Cal program, ~~which is~~ administered by the State Department of Health Services, pursuant to which medical benefits are provided to public assistance recipients and certain other low-income persons.

~~Existing law authorizes the Director of Health Services to contract with any qualified individual, organization, or entity to provide services to, arrange for, or case manage the care of Medi-Cal beneficiaries.~~

~~This bill would authorize the governing board of a local agency that provides Medi-Cal services under contract with the director to hold a closed session for the purpose of discussion of taking action on defined trade secrets.~~

*Existing law provides for the membership of the separate public agency established by the Los Angeles County Board of Supervisors for the operation of a local initiative for health care in that county, and specifies that one member of the commission shall be a representative of federally qualified*

health centers, who shall be nominated by an entity or group recognized by the board of supervisors as representing federally qualified health centers.

*This bill would specify that that member shall be representative of federally qualified health centers, or if that status no longer exists, an equivalent group of health centers.*

Vote: majority. Appropriation: no. Fiscal committee: no. State-mandated local program: no.

*The people of the State of California do enact as follows:*

1 ~~SECTION 1. The Legislature finds and declares the~~  
2 ~~following:~~

3 *SECTION 1. Section 14087.961 of the Welfare and*  
4 *Institutions Code is amended to read:*

5 14087.961. Governance of the commission shall be  
6 vested in a governing body consisting of 13 members,  
7 each of whom shall have a fiduciary duty to act in the best  
8 interest of the commission and the local initiative,  
9 nominated by the following entities, and appointed by  
10 the board of supervisors:

11 (a) Four members shall be nominated by the board of  
12 supervisors. No more than one member nominated by the  
13 board of supervisors shall be a member of the board of  
14 supervisors and each remaining member nominated by  
15 the board of supervisors shall possess experience as a  
16 health care administrator or as a health care provider.

17 (b) One member shall be a representative of private  
18 hospitals that have Medi-Cal disproportionate share  
19 status, or if that status no longer exists, that serve an  
20 equivalent patient population, who shall be nominated by  
21 the Hospital Council of Southern California.

22 (c) One member shall be a representative of private  
23 hospitals that do not have Medi-Cal disproportionate  
24 share status, who shall be nominated by the Hospital  
25 Council of Southern California.

26 (d) One member shall be a representative of free and  
27 community clinics, who shall be nominated by an entity  
28 or group recognized by the board of supervisors as  
29 representing free and community clients.

(e) One member shall be a representative of federally qualified health centers, who shall be nominated by an entity or group recognized by the board of supervisors as representing federally qualified health centers, *or if that status no longer exists, an equivalent group of health centers.*

(f) One member shall be a physician representative, who shall be nominated by the Los Angeles County Medical Association, in consultation with other physician associations within the county.

(g) One member shall be a representative of Knox-Keene licensed prepaid health plans, who shall be nominated by the California Association of Health Maintenance Organizations.

(h) One member shall be an individual who, at the time of being nominated, is a health care consumer. The initial nominee shall be nominated by the working group on the role of the consumer for the first nominee, and thereafter, by a process determined by the community advisory committee under which only health care consumers may nominate and vote for appointees.

(i) One member shall be a health care consumer advocate. The initial nominee shall be nominated by the working group on the role of the consumer for the first nominee, and thereafter, by a process determined by the community advisory committee under which only health care consumers may nominate and vote for appointees.

(j) One member shall be a children's health care provider representative, who shall be nominated by the Children's Planning Council as the coordinating entity for organizations and agencies providing direct services to, or advocacy for, children and families within the county.

~~(a) The Medi-Cal Managed Care Strategic Plan was created by the State Department of Health Services to improve access to care and to contain health care costs for beneficiaries in the Aid to Families with Dependent Children (AFDC) program.~~

~~(b) Since 1993, the state, in conjunction with certain counties, has been implementing the two plan model as~~

~~1 set forth in the 1993 Medi-Cal Managed Care Strategie  
2 Plan and will proceed into full implementation by end of  
3 this calendar year.~~

~~4 (e) A key objective of local initiatives is to preserve  
5 access to care within the two-plan model for Medi-Cal  
6 beneficiaries, with an emphasis on a network of safety net  
7 and traditional providers of Medi-Cal services.~~

~~8 (d) Managed care is currently mandated for AFDC  
9 beneficiaries and has been shown to contain costs, and to  
10 preserve quality care and access to care.~~

~~11 SEC. 2. Section 14087.301 is added to the Welfare and  
12 Institutions Code, to read:~~

~~13 14087.301. (a) Notwithstanding any other provision  
14 of law, the governing board of a local agency that provides  
15 services pursuant to Section 14087.3 may hold a closed  
16 session for the purpose of discussion of taking action on  
17 trade secrets, as defined in subdivision (c) of Section  
18 32106 of the Health and Safety Code. The requirement of  
19 making a public report of actions taken in closed session  
20 may be limited to a brief general description devoid of the  
21 information constituting a trade secret.~~

~~22 (b) The governing board may delete the portion or  
23 portions containing trade secrets from any documents  
24 that were finally approved in the closed session held  
25 pursuant to subdivision (a) that are provided to persons  
26 who have made a timely or standing request.~~